Arizona Medical Board

and the

Arizona Regulatory Board of Physician Assistants

Strategic Plan FY 2004-2005



AGENCY SUMMARY

ARIZONA MEDICAL BOARD

Director: Contact:

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MEA.0.0

A.R.S. 32-1421 to 32-1429, 32-1451 et. seq., 32-14

Mission:

To protect the public through the judicious licensing and regulation of physicians.

Description:

The Arizona Medical Board regulates the allopathic medical profession in the State of Arizona. The agency processes licenses and monitors approximately 16,000 physicians, over 1,000 physician assistants, and handles more than 1,200 complaints each year. The Board also provides administrative support to the Arizona Regulatory Board of Physician Assistants. The two boards determine and administer disciplinary action in the event of proven violations of the practice acts. The agency responds to and provides information to more than 100,000 requests for public information annually. In addition to licensing quality healthcare providers and protecting the public through disciplinary actions, furnishing accurate and timely information is the second most vital service the agency provides.

Funding and FTE Summary:		(Thou:	sands)	
	FY 2002 Actual	FY 2003 Actual	FY 2004 Estimate	FY 2005 Estimate
General Funds	0.0	0.0	0.0	0.0
Other Appropriated Funds	4,308.5	4,696.9	4,631.8	4,591.2
Other Non Appropriated Funds	0.0	0.0	0.0	0.0
Federal Funds	0.0	0.0	0.0	0.0
Program total	4,308.5	4,696.9	4,631.8	4,591.2
FTE Positions	58.5	58.5	58.5	58.5

Board of Medical Examiners

Strategic Issues

Issue 1 Provide the education and resources necessary for the public to make informed healthcare decisions.

Description:

Developing an effective public outreach campaign involves the use of several mediums targeted at a variety of groups in different areas of the state. Unlike advertising, public outreach does not require a large amount of money, but rather, an abundance of specialized contacts that are targeted for their reach to large and diverse population. Additionally, good public outreach campaigns depend upon an equally diverse message, making the Board's role of interest to a variety of people. The agency's public outreach campaign proposal identifies a number of formats the Board can use to reach Arizona citizens including: interactive videos and website media center, newsletters and pamphlets, a speakers bureau and public service announcements.

Issue 2 Streamline and automate the licensure and license renewal process by incorporating on-line applications and renewals, proactively gather primary source verification documents, and add on-line payment options.

Description:

During the past fiscal year the agency normalized the database and moved from an object-oriented to a person-oriented system. This step was necessary to develop a uniform method for retrieving uniform information from the database. The agency will further enhance this system with a web-based application that will provide on-line license application and renewal systems, automated primary source verifications, and on-line options to pay for a medical license. The license renewal process will also become more efficient with e-mail reminders, on-line renewal forms, and on-line payments – streamlining a large portion of the work needed to process over 17,000 renewal forms. In the future, as the Board addresses continuing education requirements, on-line educational and testing programs will also be available.

Issue 3 Continue to enhance interactive electronic communications to drive the delivery of business processes and services to the public and licensees.

Description:

During the past year, the Information Technology center focused primarily on refining the document imaging process for scanning Board meeting materials and licensee files. The agency also began an extensive redesign of its website to promote two-way communication with the public, physicians, hospitals, credentialing verification organizations, and medical associations. In the near future, staff will design an intranet to disseminate information quickly and accurately among staff and Board members, host an on-line employee evaluation system, and post various educational and professional development resources. It will also develop a web-based licensing system to further streamline the licensing process, and an automated public records request and retrieval system. The agency will also enhance the investigation portion of the database by expanding the document imaging component and automating its investigative and compliance tracking processes. The changes made to the investigative portion of the database will also tie into an on-line complaint filing and tracking system. Finally, the Information Technology center will complete the financial component of the database that will create a web-based application to encompass the agency's operational and financial systems.

Issue 4 Due to Arizona's increasing population and changing health care needs, the agency will partner with educational institutions and other healthcare associations to research physician workforce issues.

Description:

The Board continually strives to proactively explore policies effecting health care delivery. By partnering with Arizona's educational institutions and other health care associations, the Board will play an integral part in future public policy making. In recent years, there has been growing concern regarding the dichotomy of Arizona's increasing population and its decreasing physician population, particularly in rural demographic areas. Two research projects currently underway include a study on tracking movement and retention of Arizona's medical school graduates and another on the impact facing communities due to physicians leaving practice, by Board disciplinary action or by physician choice. In addition to effecting public policy making, the research will indicates critical issues that can by addressed by the Board's public information campaign.

Issue 5 Develop an effective investigative and adjudication process that relies on evidence-based medicine, critical case identification and prioritization, communication with complainants and licensees, and stringent compliance monitoring.

Description:

The Board's investigational and compliance-monitoring processes are arguably the Board's most publically visible and analyzed processes. By focusing on improving the quality of its medical investigations, triaging its most severe cases, documenting workflow processes and tracking investigator case loads, the Board has developed a model regulatory system. Internal evaluations of the Board's Enforcement Center resulted in the development of four enforcement divisions – ethics and morals, quality of care, compliance, and the Monitored Aftercare Program – that specialize in the investigation and monitoring of identified cases. The Board expects that the creation of these new divisions will decrease case investigation and adjudication timeframes while increasing the quality of its investigations. Additionally, as part of the new investigative process, licensees will automatically receive certain enumerated case materials with their notices for formal interviews. These materials, which had to be requested in the past, will assist licensees in their preparations for Board meetings. Finally, the Board revised its adjudication process to include three stages – investigation, Staff Investigational Review Committee, and the Board. The revised adjudication process will also contribute to reduced investigative timeframes and streamlined agency operations.

Goal 1 To evaluate and improve components of the licensing process.

Objective

1 2002 Obj: Provide interactive, full service, on-line licensing and renewals

2003 Obj: Provide interactive, full service, on-line licensing and renewals.

2004 Obj: Provide interactive, full service, on-line licensing and renewals.

2005 Obj: Evaluate and refine on-line process, encourage physician usage.

Peri	orı	mano	∠ ce Meas		poj: Evaluate and retine on-line process, encourage pny	FY2001	FY2002	FY 2003	FY2003	FY 2004	FY2005
		ML	Budget	Туре	•	Actual	Actual	Estimate	Actual	Estimate	Estimate
	1	V		OP	Number of active licensees (M.D.)	14,992	15,606	16,074	16,311	16,800	17,304
	2	✓		ОР	Number of active licensees (P.A.)	822	911	957	1,042	1,073	1,105
	3	✓		IP	Applications received by mail (M.D.)	1,097	1,032	797	1,080	890	802
	4	✓		IP	Applications received on-line (M.D.)	NA	NA	266	NA	222	344
	5	✓		IP	Applications received by mail (P.A.)	167	148	155	214	220	227
	6	✓		EF	Percent of application requests responded to within 2 days	100	100	100	100	100	100
	7	V		EF	Percent of applicants provided with deficiency reports within 30 days	100	100	100	100	100	100
	8	V		OP	Licenses issued (M.D.)	1,014	1,018	1,049	1,222	1,093	1,117
	9	Y		OP	Licenses issued (P.A Active)	143	182	191	201	207	213
	10	V		OP	Licenses issued (P.A Temporary)	35	45	47	58	55	50
	11	V		OP	Applications denied (M.D.)	7	3	4	1	1	1
	12	V		OP	Applications denied (P.A.)	1	1	1	0	1	1
	13	V		OP	Resident permits issued	1,044	980	1,010	1,058	1,071	1,093
	14	V		OP	Miscellaneous licenses issued	59	76	80	-80	82	454 . 85 55
	15	✓		OP	Dispensing certificates issued	748	508	533	401	413	425
	16	V		IP	P.A. supervision notifications processed	430	462	485	530	546	562
	17	Y	✓	EF	Average number of days to process an initial license (upon receipt of completed application) (M.D.)	60	10	10	. 2	2	a mag 2 construiction
	18	✓		IP	Biennial renewals received (M.D.)	4,216	7,687	7,918	7,932	8,170	8,415
	19	V		IP	Annual renewals received (P.A.)	1,012	934	981	1,046	1,077	1,109
	20	V		OP	Biennial renewals issued (M.D.)	4,064	7,249	7,466	7,556	7,783	8,016
	21	V		OP	Annual renewals issued (P.A.)	876	812	853	627	646	665
	22	V		OP	Biennial licenses not renewed (M.D.)	226	378	410	487	504	519
	23	✓		OP	Annual licenses not renewed (P.A.)	52	51	55	45	46	48
	24	✓	V	EF	Average number of days to process a renewal (upon receipt of completed application) (M.D.)	10	1	5	1	1	1
	25	V		QL	Average score on licensing customer service satisfaction surveys (scale of 1-8)	7.36	7.36	7.5	7.94	7.5	7.55
•	G	oal	2	To ev	aluate and improve critical components of complaint inve	stigation p	rocess.				
Obj	eci	tive			Obj: Evaluate current process and identify efficient allocated older than 12 months old.				number of	investigative	cases
					Obj: Evaluate and implement workflow processes to ach Obj: Evaluate and implement workflow processes to ach		-				
					Dbj: Reevaluate and implement workflow processes to action to the control of the		ay umonami				
Per	for	man	ce Meas		·	FY2001	FY2002	FY 2003	FY2003	FY 2004	FY2005
		ML	Budge	t Typ	e	Actual	Actual	Estimate	Actual	Estimate	Estimate

1 🗹 🗌	IP	Complaints received (M.D.)	1,103	1,260	1,280	1,256	1,507	1,658
2 🗹 🗀	IP	Complaints received (P.A.)	29	38	40	21	23	25
3 🗹 🗌	ΙP	Investigations opened (M.D.)	901	778	785	952	1,507	1,658
4 🗸 🗌	ΙP	Investigations opened (P.A.)	29	38	39	20	23	25
5 🔽 🗌	ос	Investigations remaining open at fiscal year end (M.D.)	NA	626	500	476	423	400
6 🗸 🗌	ос	Investigations remaining open at fiscal year end (P.A.)	NA	10	15	13	6	6
7 🗹 🗌	EF	Percent of open investigations greater than 6 months old (M.D.)	45	32	30	14	12	11
8 🗹	EF	Percent of open investigations greater than 6 months old (P.A.)	46	20	3	15	14	12
9 🗹 🗌	EF	Percent of open investigations greater than 12 months old (M.D.)	16	8	5	4	3	2
10 🗹 🗌	EF	Percent of open investigations greater than 12 months old (P.A.)	8	0	0	8	5	4
11 🗸 🗸	EF	Average number of days to complete an investigation (M.D.)	461	226	180	208	180	170
12 🗸 🗸	EF	Average number of days to complete an investigation (P.A.)	651	163	180	221	200	180
13 🗹 🗌	QL	Average score on enforcement customer service satisfaction surveys (scale of 1-8)	6.17	6.7	7.0	7.53	7.25	7.30

³ To evaluate and improve critical components of the adjudication process. Goal

Objective

1 2002 Obj: Fully implement proposed adjudication process.

2003 Obj: Evaluate and refine the adjudication process.

2004 Obj: Re-evaluate and refine the adjudication process.

2005 Obj: Continue to evaluate and refine the adjudication process.

Perfo	rman	ce Meas	ures		FY2001	FY2002	FY 2003	"FY2003	FY 2004	FY2005
	ML	Budget	Тур		Actual	Actual	Estimate	Actual	Estimate	Estimate
1	V		ос	Disciplinary orders issued (M.D.)	122	100	90	120	110	. 110
2	2 🗸		ос	Disciplinary orders issued (P.A.)	6	4	4	5	5.	5
3	3 🗹		OP	Non-Disciplinary orders issued (M.D.)	NA	18	17	15	20	20
4	!		OP	Non-Disciplinary orders issued (P.A.)	NA	NA	3	3	3	3
5	5 		OP	Advisory Letters issued (M.D.)	NA	49	50	56	50	50
ε	V		OP	Advisory Letters issued (P.A.)	NA	4	3	3	3	3
7	✓		OP	Dismissals issued (M.D.)	NA	1,147	1,000	733	1,307	1,458
				Beginning FY04, the Board will open every complaint i	received.					
ε	3 🗸		OP	Dismissals issued (P.A.)	NA	32	20	22	19	15
9	V	\checkmark	OP	Cases referred to formal hearing (M.D.)	50	10	10	26	20	20
10	V		OP	Cases referred to formal hearing (P.A.)	3	2	2	0	1	1
11		V	EF	Average number of days to resolve a case (M.D.)	554	269	250	264	220	200
12	2 🗸	\checkmark	EF	Average number of days to resolve a case (P.A.)	652	289	250	263	250	240
♦ G	oal	4 T	Го eva	aluate and improve critical components of the compliar	nce process.					
Objec	tive			Obj: Evaluate and refine the compliance process. Obj: Evaluate and refine the compliance process.						

2004 Obj: Evaluate and refine the compliance process.

2005 Obj: Fully automate and integrate stand-alone tracking system into database.

South Edge Copyright on South Street

Performan	ce Meas	ures		FY2001	FY2002	FY 2003	FY2003	FY 2004	FY2005
ML	Budget	Тур	•	Actual	Actual	Estimate	Actual	Estimate	Estimate
1 🗸		IP	Number of M.D.s monitored for compliance	190	207	210	221	237	253
2 🗸		IP	Number of P.A.s monitored for compliance	2	2	2	5	4	5
3 🗸		OP	Number of cases referred to the Board due to non-compliance (M.D.)	40	2	3	4	3	3
4 🗸		OP	Number of cases referred to the Board due to non-compliance (P.A.)	2	0	0	0	1	1
5 🗸		OP	Number of cases resulting in adverse action due to non-compliance (M.D.)	5	2	3	0	2	2
6		OP	Number of cases resulting in adverse action due to non-compliance (P.A.)	0	0	0	0	0	0
7 🗸		OP	Number of final orders terminated due to non-compliance (M.D.)	6	2	2	4	3	3
8 🔽		OP	Number of final orders terminated due to non- compliance (P.A.)	1	1	0	0	1	1
9 🗸		OP	Number of orders amended due to non-compliance (M.D.)	NA	2	2	0	1	1
10 🔽		OP	Number of orders amended due to non-compliance (P.A.)	0	0	0	0	0	1
11 🗸		QL	Average score on compliance customer service satisfaction surveys (scale of 1-8)	NA	6.7	7.0	7.87	7.25	7.30

[◆] Goal 5 To develop educational information and assessment tools utilizing multi-media solutions.

Objective

- 1 2002 Obj: Expand web-based information through hyperlinks with appropriate education sites and information.
 - 2003 Obj: Explore and develop assessment criteria for initial and continued licensure. Continue to develop outreach programs through public speaking events, interactive videos, positive media exposure and informational materials.
 - 2004 Obj: Implement program changes to enhance physician competency.
 - 2005 Obj: Continue to develop and identify forums for information-sharing and educational development.

Perfor	man	ce Meas	ures:		FY2001	FY2002	FY 2003	FY2003	FY 2004	FY2005
	ML	Budget	Туре		Actual	Actual	Estimate	Actual	Estimate	Estimate
1	V		OP	Informational pamphlets developed	NA	NA	NA	5	· 3 - i	3 %
2	V		OP	Public speaking presentations	NA	NA	NA	5	10	10
3	V		ОР	Articles written for publications	NA	NA	NA	12	15	15
4	✓		OP	New educational materials posted to website	NA	NA	NA	6	4	4
5	V		EF	Customer satisfication with on-line physician education programs (scale of 1-8)	NA	NA	NA	NA	7.0	7.25
6	V		OP	Agency media releases sent to outside organizations (M.D.)	NA	NA	NA	13	15	15
7	✓		OP	Agency media releases sent to outside organizations (P.A.)	NA	NA	NA	5	5	5
8	V		ОР	Profiles provided	20,412	17,772	16,000	85,484	90,000	100,00
				As of FY03, this measure is accurately tracked through	website soft	ware.				
9	y		OP	Profiles accessed on-line by external sources	109,674	1,624,518	1,750,000	3,110,629	3,500,000	4,000,000
				As of FY03, this measure is accurately tracked through	website sof	ware.				
10	V		OP	Healthcare Provider Profiles accessed on-line at http://docfinder.state.az.us	NA	NA	NA	10,521	860,040	900,000
				Website developed June FY03. This measure is accura	tely tracked	through web	site softwar	e.		
11	V	✓	EF	Ratio of Internet hits at www.azmdboard.org to public records requests received. (Represented in thousands)	109.6/3.1	1624.5/1.1	1750.0/1.5	9281.2/.85	10580./.75	13813./.70

				ARIZONA MASTER LIST OF STATE GOVERNI	MENT PRO	GRAMS				
12	/		IP	Public record requests (M.D.)	3,131	1,082	1,500	871	750	700
13			IP	Public record requests (P.A.)	21	15	20	35	40	40
14	1		EF	Percent of requests processed within 10 days	74	96	100	100	100	100
15	1		ΙP	Public e-mails received at questions@azmdboard.org	996	971	1,000	1,421	2,132	3,198
16	/		OP	Percent of initial public e-mail answered within 48 hours	95	96	95	97	97	97
17	/		OP	Verifications processed	1,864	1,700	2,000	1,616	1,531	1,457
18	/		EF	Percent of verifications processed within 2 days	95	100	100	100	100	100
19	/		EF	Average number of days to respond to external surveys	3.5	1.5	2	1.5	2	2
20	✓		QL	Average score on public information customer service satisfaction surveys (scale of 1-8)	NA	7.36	7.5	8.0	7.5	7.55
♦ Goal	ı	6	To eva	aluate and analyze healthcare issues affecting our regula	atory framev	vork.				
			2004 C	 Obj: Continue to identify major healthcare delivery issues improved framework and propose rules and hold he Obj: Continue to identify major healthcare delivery issues improved framework and propose rules and hold he Obj: Continue to identify major healthcare delivery issues improved framework and propose rules and hold he 	earings to fure searings to fure arrings to fure affecting residuals.	lly implemer egulatory fra lly implemer egulatory fra	nt changes. amework, pro nt changes. amework, pro	opose legisl	ation to addr	ess
Perform M			asures et Type		FY2001 Actual	FY2002 Actual	FY 2003 Estimate	FY2003 Actual	FY 2004 Estimate	FY2005 Estimate
1 [✓		OP	Number of healthcare issues brought for Board discussion	NA	5	3	4	3	3
2 [V		EF	Percent of statutory changes approved in legislation	100	100	100	100	100	, - 100 : 1
3 [✓	\square	, EF	Percent of rules proposed and adopted within an 8 month timeframe	100	100	100	100	100 🚓	100 - 100 -
♦ Goa	I	7	To ma	intain agency technical infrastructure.			2	A Pa		Application (1989)
Objectiv	e	1	2003 (2004 (Obj: Evaluate and document information technology pro- Obj: Evaluate and document information technology pro- Obj: Evaluate and refine information technology process Obj: Evaluate and refine information technology process	cesses. ses.		D e	केर च र ्	e dig divini	· (*)
Perform					FY2001 Actual	FY2002 Actual	FY 2003 Estimate	FY2003 Actual	FY 2004 Estimate	FY2005 Estimate
		Budg	et Typ		NA	100	95	99.1	99.3	99.4
. [✓	Ш	EF	Provide system access and training to new users within 3 days of start date	INA	100	93	33.1	33.3	33.4
2 {	✓		QL	Percent of month that full network system uptime standard is met	95	95	95	97.4	97.5	98
◆ Goa	l	8	To pro	ovide fiscal services in support of agency goal.						
Objectiv	re	1	2003 (2004 (Obj: Evaluate and refine Business Operations processes Obj: Evaluate and refine Business Operations processes Obj: Evaluate and refine the Business Operations proce Obj: Evaluate and refine the Business Operations proce	s. sses.					
Perform	ance	e Me	asures	:	FY2001	FY2002	FY 2003	FY2003	FY 2004	FY2005
		Budg	et Typ		Actual	Actual	Estimate	Actual	Estimate	Estimate
1 [✓		ос	Percent of invoices and related claims processed within 4 business days	NA	95	95	97	95	95
2 [✓		ОС	Percent of personnel actions entered within appropriate timeframe	NA	95	95	96	95	95

3 🗸		ос	Percent of supply requests processed within 1 business day	NA	95	95	98	98	98
4 🗸		ос	Percent of incoming revenue/deposits processed the same day	NA	95	95	100	100	100
5 🗸	✓	QL	Average score of agency-wide customer service satisfaction surveys. (Scale of 1-8)	6.765	7.03	7.25	7.835	7.375	7.425

This measure represents the average customer satisaction survey results for each department.

◆ Goal 9 To expand professional development and learning programs.

Objective

1 2002 Obj: Fully develop and implement core competency-based internal and external training programs.

2003 Obj: Continue to develop and implement core competency-based internal and external training programs.

2004 Obj: Review and update Position Description Questionnaires to reflect identified core competencies

2005 Obj: Evaluate and refine programs. Implement Performance Management Program

	14								
erforman ML				FY2001 Actual	FY2002 Actual	FY 2003 Estimate	FY2003 Actual	FY 2004 Estimate	FY2005 Estimate
ML	Budget	ı ype							
1 🗸		IP	Number of innovative training/development programs proposed	NA	7	3	7	4	5
2 🗸		OP	Number of innovative training/development programs completed	NA	4	2	6	3	4
3 🗹		OP	Number of performance feedback surveys completed	NA	0	40	0	50	60
4 🗸		IP	Number of training requests received	NA	NA	50	84	90	95
5 🗹		OP	Number of training requests approved	NA	NA	40	84	90	95
6 🗸		ос	Percent of staff completing training/continuing education/development per year	NA	55	60	35	65	70
7 🗸		OP	Position Description Questionnaires reviewed and/or updated	NA	14	20	22	25	30

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